

Credentialing Criteria – Behavioral Health Providers

Effective Date: 04/01/2013

Last Review Date: 03/2021

Last Revision Date: 01/2018

Next Review Date: 03/2022

Owner: Credentialing Manager

Approving Authority: Corporate
Credentials Committee

Background

Each Provider that applies for participation will be evaluated using the following criteria established by the Corporate Credentials Committee.

Criteria

1. Completion of appropriate training/degree from approved school/programs as required by national, state or local requirements to obtain licensure, registration or certification to practice his/her profession.
2. Current and unrestricted license to practice in Kansas. The licensure must be at full clinical level of practice. Full clinical practice level is defined as an unrestricted license that is not subject to limitations on the scope of practice ordinarily granted all other Applicants for similar specialty in the granting jurisdiction. A licensure with limitations or restrictions does not meet the definition of full clinical level of practice. A license on probation with or without restrictions or limitations will be reviewed on an individual basis.
3. In order to participate as a contracting provider with BCBSKS, all Applicants must complete the CAQH credentialing application.
4. Any review/action taken by the licensing board will be reviewed on an individual basis.
5. Current and unrestricted DEA number, as appropriate, for practice.
6. Current professional liability coverage which meets or exceeds minimum limits, as established by the State of Kansas as verified by the insurer, and includes the Applicants name, effective and expiration dates. A group roster or email, received on the groups letterhead, will be accepted as verification of the named individual Applicant on a group malpractice insurance certificate. Coverage through the Kansas Healthcare Stabilization Fund (HCSF) is required and can be Primary Source Verified when applicable for specialties.
7. In instances when there is a history of involvement in a malpractice suit(s), arbitration, or settlement during the ten-year period preceding the initial credentialing process, or the interval between re-credentialing processes, evidence that this history does not demonstrate probable future sub-standard professional performance.
8. Absence of patterns of behavior to suggest quality of care concerns.
9. No sanctions placed upon him/her by Medicaid, Medicare, or exclusions by Federal Employee Health Benefit Program. If Applicant has such history, Applicant will be denied credentialing if Applicant: (1) is currently excluded, suspended, or otherwise ineligible to participate in any state or federal healthcare programs, including but not limited to Medicare, Medicaid or Federal Employee Health Benefit Program or (2) has been convicted of a criminal offense related to the



provision of health care items or services and has not been reinstated in a state or federal health care program, after a period of exclusion, suspension, or ineligibility.

10. Absence of a history of disciplinary actions affecting Applicant's professional license or other required certification. For Applicants with such history, evidence that this history does not currently affect Applicants ability to perform professional duties, for which the Applicant is contracted, or does not demonstrate probable future sub-standard performance.
11. Absence of any felony convictions. Misdemeanor or court-martial convictions will be reviewed on an individual basis.
12. No **current** drug or alcohol abuse. Absence of a **history** of chemical dependency/substance abuse. For those Applicants who have such history, evidence that the Applicant is participating in, or has completed a prescribed, monitored treatment program, and that no further current chemical dependency or substance abuse exists.
13. The Credentials Committee shall evaluate all information submitted, including but not limited to supporting documentation provided by the Applicant during the application process, when determining a decision to approve or deny an Applicant's credentialing status.
14. The Credentials Committee shall be responsible for evaluating Practitioners applications that do not meet all criteria and give thoughtful consideration to both the credentialing elements and all information provided before making a final credentials committee determination.
15. Fraudulent information or misrepresentation on the CAQH application or paper application sent to BCBSKS or with any information submitted for the credentialing process may result in denial/cancellation from the BCBSKS network.

The above criteria must be maintained on an on-going basis by all Providers who contract with BCBSKS.



Process Flow Chart (if applicable)

Related Forms

Validation (if applicable)

Revision Log

<i>Effective Date</i>	<i>Description of Change</i>	<i>Revision Approved By</i>
6/28/2013	Revised	BCBSKS Board of Directors
3/25/2015	Revised	Corporate Credentials Committee
3/30/2015	Annual Review	Steering Committee
2/24/2015	Revised	Corporate Credentials Committee
3/7/2016	Annual Review	Steering Committee
2/22/2017	Annual Review	Corporate Credentials Committee
2/27/2017	Annual Review	Steering Committee
1/24/2018	Revised	Corporate Credentials Committee
3/05/2018	Annual Review	Steering Committee
1/23/2019	Annual Review	Corporate Credentials Committee
3/4/2019	Annual Review	Steering Committee
02/26/2020	Annual Review	Corporate Credentials Committee
03/02/2020	Annual Review	Steering Committee
02/24/2021	Annual Review	Corporate Credentials Committee
03/08/2021	Annual Review	Steering Committee

Policies Supported by this Procedure

<i>Corporate Policies</i>	<i>Departmental Policies</i>